

Governor Barbour Asks Medicaid Director to Help PLADs Recipients at Rally

(Jackson, MS) Governor Haley Barbour today asked Division of Medicaid Executive Director Dr. Warren Jones to go to the Capitol along with several Medicaid case workers to set up a consultation table next to a planned rally featuring Medicaid recipients who will be transferring to Medicare in September. Dr. Jones and his team brought Medicaid-to-Medicare transition information for the recipients to use and made themselves available for 90 minutes to consult with those in attendance. Many of those attending the rally said they had not examined any of the Medicare options that are available for them.

Governor Barbour said the fact that many of the recipients attending the rally had not explored the encouraging Medicare options available to them just underscores why he felt the need to extend the Medicaid-to-Medicare deadline to September 15. "I hope legislators will join me over the 11 weeks in informing these PLADs recipients and not enflaming them," said Governor Barbour. "Many of these recipients have been scared for political reasons and not given information about prescription drug coverage options and that is wrong," he added.

The approximately 50 Medicaid recipients at the rally were called together by various lobbying groups and House members who are attempting to overturn the Medicaid Reform Act of 2004 during a special session Governor Barbour called to reauthorize the Department of Human Services which is set to expire at midnight.

After a press conference in Canton Monday announcing an extension of the Medicaid-to-Medicare

transition, Governor Haley Barbour met Ms. Winnie McGruder, a Canton PLADs recipient. After discussing her prescription needs, the Governor and his staff determined that Ms. McGruder will not be adversely affected by the Medicaid Reform Act changes to take effect in September.

Ms. McGruder takes 11 drugs, including several common, over-the-counter medications. Five of her drugs will be available to her for free under the patient assistance programs. The most she will pay for any of her other medication is \$12 for a 30 day supply. Her total drug costs will be \$39 per month. This cost will be more than covered by the \$1200 Ms. McGruder will receive from the federal Medicare program between September 15, 2004, and January 1, 2006, when the full Medicare prescription drug benefit becomes law.

“We are finding that if we can help people simply review the prescription drug coverage options available to them they are usually very satisfied,” said Dr. Jones.

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